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CONFIRMATION NO. 5121

<b>SERIAL NUMBER</b> 10/596,303	<b>FILING OR 371(c) DATE</b> 01/26/2007 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 4134	<b>ATTORNEY DOCKET NO.</b> P30093
<b>APPLICANTS</b> Hiromi Matsuzaki, Tokyo, JAPAN; Yoshie Tominaga, Saitama, JAPAN; <i>AHW</i>				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP04/18359 12/09/2004 <i>AHW</i>				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN P2003410873 12/09/2003 <i>AHW</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/17/2007</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Amante Helen</i> <i>AHW</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 21
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 7055				
<b>TITLE</b> Bone Replacement Material				
<b>FILING FEE RECEIVED</b> 1080	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	